



MAY 03 2004

PTO/SB/21 (08-03)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|--|------------------------|------------------|
| | | Application Number | 09/980,921 |
| | | Filing Date | October 26, 2001 |
| | | First Named Inventor | Ami Verhalen |
| | | Art Unit | 3724 |
| | | Examiner Name | Choi, Stephen |
| Total Number of Pages in This Submission | | Attorney Docket Number | 006593-1966 |

ENCLOSURES (Check all that apply)

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): --Return Postcard |
| <input type="checkbox"/> Remarks <p>The Commissioner is hereby authorized to charge any additional fees required (including the fee for any extension of time), or to credit any overpayment, to Deposit Acct No.: 20-0809.</p> | | |

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Thompson Hine LLP 2000 Courthouse Plaza N.E., 10 West Second Street Dayton, Ohio 45402-1758 |
| Signature | |
| Date | 4/30/2004 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | | | |
|-----------------------|--|------|-----------|
| Typed or printed name | Michael J. Nieberding, Registration No. 39,316 | | |
| Signature | | Date | 4/30/2004 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL
for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 110.00)**Complete if Known**

| | |
|----------------------|------------------|
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| First Named Inventor | Ami Verhalen |
| Examiner Name | Choi, Stephen |
| Art Unit | 3724 |
| Attorney Docket No. | 006593-1966 |

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

 Deposit Account:

Deposit Account Number
20-0809
Deposit Account Name
Thompson Hine LLP

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|---------------------|--------------|---------------|---------------|------------------------|----------|
| 1001 | 750 | 2001 | 375 | Utility filing fee | |
| 1002 | 330 | 2002 | 165 | Design filing fee | |
| 1003 | 520 | 2003 | 260 | Plant filing fee | |
| 1004 | 750 | 2004 | 375 | Reissue filing fee | |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | (\$ 0) | | | |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| | | | |
|--------------------|--------------|----------------|----------|
| Total Claims | Extra Claims | Fee from below | Fee Paid |
| Independent Claims | | | |
| Multiple Dependent | | | |

20** = X 18 =
 3** = X 86 =

| Large Entity | Small Entity | Fee Description |
|---------------------|--------------|---|
| 1202 | 18 | 2202 9 Claims in excess of 20 |
| 1201 | 84 | 2201 42 Independent claims in excess of 3 |
| 1203 | 280 | 2203 140 Multiple dependent claim, if not paid |
| 1204 | 84 | 2204 42 ** Reissue independent claims over original patent |
| 1205 | 18 | 2205 9 ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) | | (\$ 0) |

*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Small Entity

| Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|---------------------------|---------------|--|----------|
| 1051 | 130 | 2051 65 Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 25 Surcharge - late provisional filing fee or cover sheet | |
| 1053 | 130 | 1053 130 Non-English specification | |
| 1812 | 2,520 | 1812 2,520 For filing a request for ex parte reexamination | |
| 1804 | 920* | 1804 920* Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 1,840* Requesting publication of SIR after Examiner action | |
| 1251 | 110 | 2251 55 Extension for reply within first month | |
| 1252 | 410 | 2252 205 Extension for reply within second month | |
| 1253 | 930 | 2253 465 Extension for reply within third month | |
| 1254 | 1,450 | 2254 725 Extension for reply within fourth month | |
| 1255 | 1,970 | 2255 985 Extension for reply within fifth month | |
| 1401 | 320 | 2401 160 Notice of Appeal | |
| 1402 | 320 | 2402 160 Filing a brief in support of an appeal | |
| 1403 | 280 | 2403 140 Request for oral hearing | |
| 1451 | 1,510 | 1451 1,510 Petition to institute a public use proceeding | |
| 1452 | 110 | 2452 55 Petition to revive - unavoidable | |
| 1453 | 1,300 | 2453 650 Petition to revive - unintentional | |
| 1501 | 1,300 | 2501 650 Utility issue fee (or reissue) | |
| 1502 | 470 | 2502 235 Design issue fee | |
| 1503 | 630 | 2503 315 Plant issue fee | |
| 1460 | 130 | 1460 130 Petitions to the Commissioner | |
| 1807 | 50 | 1807 50 Processing fee under 37 CFR 1.17(q) | |
| 1806 | 180 | 1806 180 Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 40 Recording each patent assignment per property (times number of properties) | |
| 1809 | 750 | 2809 375 Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 1810 | 750 | 2810 375 For each additional invention to be examined (37 CFR 1.129(b)) | |
| 1801 | 750 | 2801 375 Request for Continued Examination (RCE) | |
| 1802 | 900 | 1802 900 Request for expedited examination of a design application | |
| Other fee (specify) _____ | | | |

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 110.00)RECEIVED
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R8709**SUBMITTED BY**

| | | | | | |
|-------------------|------------------------------|-----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Michael J. Nieberding | Registration No. (Attorney/Agent) | 39,316 | Telephone | 937-443-6892 |
| Signature | <i>Michael J. Nieberding</i> | | | Date | 4/30/2004 |

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